

Change of Decal Registration Form

Date _____

Resident _____

Address _____

Phone _____

New Vehicle _____
(year , make, model, tag #)

New Springs Decal # _____

New Bar Code # _____

Additional or Replacement **(please circle)**

Old Vehicle _____
(year, make, model, tag #)

Old Springs Decal # _____

Old Bar Code # _____

_____ Date Deleted (office use only) Security Initials _____